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AMENDED IN ASSEMBLY AUGUST 1, 2016

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AMENDED IN ASSEMBLY JUNE 16, 2016

AMENDED IN SENATE MAY 31, 2016

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AMENDED IN SENATE MARCH 28, 2016

**SENATE BILL**

**No. 1339**

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**Introduced by Senator Monning**

February 19, 2016

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*An act to amend Section 11102 of, to add Section 10003 to, and to amend and repeal Sections 11052.6, 11053, and 11053.2 of, to amend, repeal, and add Section 11102 of, and to add Section 10003 to, the Welfare and Institutions Code, relating to public social services.*

LEGISLATIVE COUNSEL'S DIGEST

SB 1339, as amended, Monning. Public social services: intercounty transfers.

Existing law provides for the California Work Opportunity and Responsibility to Kids (CalWORKs) program under which, through a combination of state and county funds and federal funds received through the Temporary Assistance for Needy Families (TANF) program,

each county provides cash assistance and other benefits to qualified low-income families.

Existing law establishes the Medi-Cal program, administered by the State Department of Health Care Services, under which qualified low-income persons are provided with health care services.

Existing law establishes a statewide program to enable eligible low-income persons to receive food stamps under the federal Supplemental Nutrition Assistance Program (SNAP), known in California as CalFresh. Existing law requires counties to implement the program, including determining eligibility and distributing CalFresh benefits. Existing law requires the State Department of Social Services to establish and implement a process of intercounty transfer of eligibility for CalFresh benefits, and to take various regulatory actions.

Existing law requires the county where an applicant of a public assistance program lives to be responsible for paying for the aid and requires transfer of the responsibility to pay, when that person moves to another county, to the 2nd county as soon as administratively possible, but not later than the first day of the month following 30 days after notification to the 2nd county.

This bill would ~~instead~~ *instead, commencing June 1, 2017*, require the responsibility for payment of aid to transfer to the 2nd county as soon as administratively possible ~~and within 30 days after either county becomes aware of the aid recipient's move~~, *possible*, as specified. The bill would delete provisions relating to the determination of the county of residence for an aid recipient who has been released or discharged from a state hospital.

Under existing law, a recipient of aid who is changing residence from one county to another within the state is required to notify the county paying aid to the recipient of the move, and to apply for a redetermination of eligibility within the new county of residence. Existing law imposes various requirements on the relevant counties, including requiring the county to which the recipient has moved to determine the recipient's continued eligibility for payment of aid and, to the extent possible, the recipient's eligibility for the Medi-Cal program.

This bill would ~~delete~~ *make inoperative on June 1, 2017*, those provisions relating to the notice and redetermination of aid procedures for when a recipient of aid changes residence from one county to another within the state, including the procedures for intercounty transfer of CalFresh benefits. The bill would ~~instead~~ *instead, commencing June 1*,

~~2017, require the recipient to notify either the county from which he or she moves or the county to which he or she moves of the change of residence and, as soon as either county is aware of the move, within 7 business days of notice of a new residence, would require that county to initiate an intercounty transfer for specified public social service benefits. The bill would require that the benefits be processed for transfer and the new county of residence be reflected in a specified database within 30 days after either of those counties becomes aware of the recipient's move, as specified: transferred no later than the first day of the next available benefit month following 30 days after a county was notified. The bill would prohibit, to the extent permitted by federal law and regulation, prohibit the new county of residence from interviewing recipients from another county to determine continued eligibility for the CalWORKs or CalFresh programs until the next scheduled recertification or redetermination, and would require case file documents to be shared electronically between the prior county of residence and the new county of residence. For a beneficiary required to receive services through a Medi-Cal managed care health plan, who moves to another county, but is still enrolled in the managed care health plan in the county from which he or she moved and needs services in the new county, the bill would require the Medi-Cal Managed Care Ombudsman to, upon request by the beneficiary or either county, disenroll the beneficiary as an expedited disenrollment from his or her managed care health plan. The bill would provide that the beneficiary is entitled to the full scope of benefits for which he or she is entitled to in the new county through the fee-for-services delivery system until he or she is enrolled in a Medi-Cal managed care health plan in the new county. The bill would require the State Department of Health Care Services and the State Department of Social Services to adopt regulations by July 1, 2021. The bill would require, beginning June 1, 2017, the departments to provide a status report on the adoption of the regulations to the Legislature on a semiannual basis. Because this bill would impose additional duties on counties with regard to the provision of aid, this bill would impose a state-mandated local program.~~

Existing law continuously appropriates moneys from the General Fund to defray a portion of county costs under the CalWORKs program.

This bill would instead provide that the continuous appropriation would not be made for purposes of implementing the bill.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to these statutory provisions.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: yes.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 10003 is added to the Welfare and  
2 Institutions Code, to read:  
3 10003. (a) It shall be the responsibility of a recipient *of aid*  
4 *pursuant to this division* changing residence from one county to  
5 another to promptly notify either the county from which he or she  
6 moves or the county to which he or she moves of the change of  
7 residence. Recipients of CalWORKs, CalFresh, or Medi-Cal shall  
8 have the ~~right~~ *option* to report a change of residence in person, in  
9 writing, telephonically, or, if the technology is available,  
10 electronically online and shall be advised of ~~this right~~ *these options*  
11 at the time of application and redetermination or recertification.  
12 ~~If a recipient moves from one county to another county, as soon~~  
13 ~~as either county is aware of the move, that county shall initiate an~~  
14 ~~intercounty transfer for all benefits under this division that the~~  
15 ~~recipient is receiving. Benefits for all programs for which the~~  
16 ~~recipient is eligible shall be processed for transfer, and the new~~  
17 ~~county of residence shall be reflected in the Medi-Cal Eligibility~~  
18 ~~Data System, within 30 days after either of those counties becomes~~  
19 ~~aware of the recipient's move in order to effectuate the earliest~~  
20 ~~possible start date at the beginning of the next available benefit~~  
21 ~~month. Within seven business days of notice of a new residence,~~  
22 ~~the notified county shall initiate an intercounty transfer for all~~  
23 ~~benefits under this division that the recipient is receiving, and~~  
24 ~~benefits shall be transferred no later than the first day of the next~~  
25 ~~available benefit month following 30 days after a county was~~  
26 ~~notified pursuant to this section.~~  
27 (b) To the greatest extent possible, the intercounty transfer  
28 process shall be simple and client friendly and minimize workload

for county eligibility operations. The process shall ensure the applicant or recipient does not need to provide copies of documents that were previously provided to the prior county of residence, and there is no interruption in benefits.

(c) Case file documents shall be electronically shared between the prior county of residence and the new county of residence, to the extent possible, as specified by the relevant state departments.

~~(d) To the extent permitted by federal law and regulation,~~ *Notwithstanding Section 11052.5, the new county of residence shall not interview recipients moving to that county from another county to determine continued eligibility for CalFresh or CalWORKs until the next scheduled recertification pursuant to Section 18910.1 or redetermination pursuant to Section 11265. This section shall not preclude the new county of residence from interviewing CalWORKs recipients regarding welfare-to-work program participation, which is not a requirement for an intercounty transfer of CalWORKs eligibility.*

(e) For beneficiaries required to receive services through a Medi-Cal managed care health plan, the following shall apply:

*(1) If the beneficiary moves to another county and is still enrolled in a managed care health plan in the county from which he or she moved, the beneficiary shall have continued access to emergency services and any other coverage the managed care health plan authorizes out-of-network until the time that the intercounty transfer process pursuant to subdivision (a) is complete and the beneficiary is disenrolled from the managed care health plan.*

~~(1)~~

*(2) If the beneficiary moves to another county and is still enrolled in a managed care health plan in the county from which he or she moved and needs services nonemergent care that same month in the new county, the Medi-Cal Managed Care Ombudsman shall, upon request by the beneficiary or either county, disenroll the beneficiary as an expedited disenrollment from his or her managed care health plan effective the next business day after the request is made. plan. County-initiated disenrollment using an online form shall be processed no later than three business days after the request is made. Beneficiary-initiated disenrollment by telephone shall be effective no later than two business days after the request is made when the request is made before 5 p.m. Any*

1 *beneficiary-initiated disenrollment request by phone made after*  
2 *5 p.m. shall be processed the following business day and be*  
3 *effective no later than two business days after the request is*  
4 *processed.*

5 ~~(2)~~

6 (3) A beneficiary who is disenrolled from the managed care  
7 health plan in the county from which he or she moved pursuant to  
8 paragraph ~~(1)~~ (2) shall be entitled to the full scope of benefits for  
9 which he or she is entitled to in the new county through the  
10 ~~fee-for-services~~ *fee-for-service* delivery system until he or she is  
11 enrolled in a managed care health plan in the new county.

12 ~~(3)~~

13 (4) If the beneficiary moves to a county that provides Medi-Cal  
14 services through a county organized health system, the beneficiary  
15 shall be enrolled in that county organized health system plan on  
16 the first day of the ~~month~~ *following month once* the new county  
17 of residence is reflected in the Medi-Cal Eligibility Data System.  
18 If a beneficiary moves to a county without a county organized  
19 health system, the usual health plan choice process shall apply.

20 (f) Failure to report a move to a different county within the state  
21 in itself shall not constitute a basis for an overpayment.

22 (g) (1) *Notwithstanding Chapter 3.5 (commencing with Section*  
23 *11340) of Part 1 of Division 3 of Title 2 of the Government Code,*  
24 *the State Department of Health Care Services and the State*  
25 *Department of Social Services, without taking any further*  
26 *regulatory action, shall implement, interpret, or make specific this*  
27 *section by means of all-county letters, plan letters, plan or provider*  
28 *bulletins, or similar instructions until the time regulations are*  
29 *adopted. The State Department of Health Care Services and the*  
30 *State Department of Social Services shall adopt regulations by*  
31 *July 1, 2021, in accordance with the requirements of Chapter 3.5*  
32 *(commencing with Section 11340) of Part 1 of Division 3 of Title*  
33 *2 of the Government Code.*

34 (2) *Beginning June 1, 2017, and notwithstanding Section*  
35 *10231.5 of the Government Code, the State Department of Health*  
36 *Care Services and the State Department of Social Services shall*  
37 *provide a status report on the adoption of the regulations to the*  
38 *Legislature on a semiannual basis, in compliance with Section*  
39 *9795 of the Government Code, until regulations have been adopted.*

1     (h) *This section shall be implemented only if, and to the extent,*  
2     *that federal financial participation is available and any necessary*  
3     *federal approvals have been obtained.*

4     (i) *This section shall become operative on June 1, 2017.*

5     ~~SEC. 2. Section 11053 of the Welfare and Institutions Code is~~  
6     ~~repealed.~~

7     ~~SEC. 3. Section 11053.2 of the Welfare and Institutions Code~~  
8     ~~is repealed.~~

9     ~~SEC. 4. Section 11102 of the Welfare and Institutions Code is~~  
10    ~~amended to read:~~

11    ~~11102. (a) County residence is not a qualification for aid under~~  
12    ~~any public assistance program.~~

13    ~~(b) County responsibility for making aid payments is determined~~  
14    ~~as follows:~~

15    ~~(1) The county where the applicant lives shall accept the~~  
16    ~~application and shall be responsible for paying the aid.~~

17    ~~(2) Responsibility for payment of aid to a person qualifying for~~  
18    ~~and receiving aid from a county, who moves to another county in~~  
19    ~~this state to make his or her home, shall be transferred to the second~~  
20    ~~county as soon as administratively possible pursuant to the~~  
21    ~~requirements set forth in subdivision (a) of Section 10003.~~

22    ~~(c) For purposes of public assistance, the county where an~~  
23    ~~applicant or recipient lives is determined as follows:~~

24    ~~(1) For a patient in a state hospital or institution, voluntary,~~  
25    ~~nonprofit, or proprietary facility, or other public or private~~  
26    ~~institution, the county where he or she was admitted.~~

27    ~~(2) For a person who has had to leave the county where he or~~  
28    ~~she normally lives, solely for the purpose of securing care not~~  
29    ~~otherwise available to him or her in a medical facility, the county~~  
30    ~~where he or she last maintained a living arrangement outside a~~  
31    ~~medical facility.~~

32    ~~SEC. 2. Section 11052.6 of the Welfare and Institutions Code~~  
33    ~~is amended to read:~~

34    ~~11052.6. (a) Notwithstanding any other provision of law, the~~  
35    ~~requirements of Section 11052.5 shall not apply to any caretaker~~  
36    ~~relative when all of the following apply:~~

37    ~~(1) He or she is an approved relative pursuant to subdivision~~  
38    ~~(d) of Section 309 caring for a child who is a dependent child of~~  
39    ~~the court, and is receiving benefits under the CalWORKs program~~  
40    ~~on behalf of the child.~~

1 (2) The caretaker relative is changing residence from one county  
2 to another county and is applying for benefits in the new county  
3 on behalf of one or more related children who are current recipients  
4 of benefits under the CalWORKS Program under Chapter 2  
5 (commencing with Section 11200) of Part 3.

6 (3) The caretaker relative is not an applicant for or a recipient  
7 of benefits under the CalWORKS Program.

8 (b) If the caretaker relative subsequently applies for benefits  
9 under the CalWORKS Program, he or she shall be subject to the  
10 requirements of Section 11052.5 that are applicable to that  
11 program.

12 (c) The county CalWORKs program shall verify that the  
13 individual applying for benefits meets the criteria set forth in this  
14 section.

15 (d) *This section shall become inoperative on June 1, 2017, and,*  
16 *as of January 1, 2018, is repealed, unless a later enacted statute,*  
17 *that becomes operative on or before January 1, 2018, deletes or*  
18 *extends the dates on which it becomes inoperative and is repealed.*

19 SEC. 3. *Section 11053 of the Welfare and Institutions Code is*  
20 *amended to read:*

21 11053. (a) It shall be the responsibility of a recipient changing  
22 residence from one county to another within the state to promptly  
23 notify the county paying aid to the recipient of the move and to  
24 apply for a redetermination of eligibility within the new county of  
25 residence. The first county shall notify the second county of the  
26 recipient's move as soon as the recipient's location in the second  
27 county is known. The county to which the recipient has moved  
28 will be responsible for determining the recipient's continued  
29 eligibility for payment of aid and, to the extent possible, as  
30 determined by the Director of Health Services, eligibility for the  
31 Medi-Cal program, as of the first day of the month following 30  
32 days after the first county has notified the second county of the  
33 recipient's relocation. The first county shall provide the second  
34 county with copies of those documents, as specified by the  
35 department, necessary to establish current eligibility and grant  
36 amount.

37 (b) *This section shall become inoperative on June 1, 2017, and,*  
38 *as of January 1, 2018, is repealed, unless a later enacted statute,*  
39 *that becomes operative on or before January 1, 2018, deletes or*  
40 *extends the dates on which it becomes inoperative and is repealed.*



1     *SEC. 4. Section 11053.2 of the Welfare and Institutions Code*  
2     *is amended to read:*

3     11053.2. (a) Notwithstanding any other law, the department  
4     shall establish a process of intercounty transfer of eligibility for  
5     CalFresh benefits provided under Chapter 10 (commencing with  
6     Section 18900) of Part 6 when a recipient changes residence from  
7     one county to another within the state. The intercounty transfer  
8     process shall facilitate a recipient's move from one county to  
9     another without a break in benefits and without requiring a new  
10    application to be submitted to the new county of residence.

11    (b) (1) For CalFresh recipients who are receiving CalWORKs  
12    benefits pursuant to Chapter 2 (commencing with Section 11200),  
13    the intercounty transfer process utilized for CalWORKs shall be  
14    used.

15    (2) For CalFresh recipients who are receiving Medi-Cal benefits  
16    pursuant to Chapter 7 (commencing with Section 14000), but are  
17    not receiving CalWORKs benefits pursuant to Chapter 2  
18    (commencing with Section 11200), the intercounty transfer process  
19    utilized for the Medi-Cal program shall be used.

20    (3) This subdivision shall be implemented no later than April  
21    1, 2011.

22    (c) For CalFresh recipients who are not receiving CalWORKs  
23    or Medi-Cal benefits as described in paragraphs (1) and (2) of  
24    subdivision (b), an intercounty transfer process shall be developed,  
25    in consultation with representatives of county human services  
26    departments and advocates for recipients. To the greatest extent  
27    possible, the process shall be simple, client friendly, ensure the  
28    client does not need to provide copies of documents that were  
29    previously provided to the prior county of residence, build on  
30    existing processes for the programs described in paragraphs (1)  
31    and (2) of subdivision (b), and minimize workload for county  
32    eligibility operations. The process developed pursuant to this  
33    subdivision shall be implemented no later than July 1, 2011.

34    (d) Upon the implementation of the intercounty transfer  
35    procedures set forth in this section, it shall be the responsibility of  
36    a recipient changing residence from one county to another within  
37    the state to notify his or her prior county of residence of his or her  
38    move. The prior county of residence shall notify the new county  
39    of the recipient's move as soon as the recipient's location in the  
40    new county is known. The new county of residence shall be

1 responsible for determining the recipient's continued eligibility  
2 for payment of CalFresh benefits. To the extent permitted by  
3 federal law, the new county of residence shall not be required to  
4 interview persons in the CalFresh household to determine continued  
5 eligibility until the next scheduled recertification or other regularly  
6 scheduled interview.

7 (e) Notwithstanding the Administrative Procedure Act (Chapter  
8 3.5 (commencing with Section 11340) of Part 1 of Division 3 of  
9 Title 2 of the Government Code), the department may implement  
10 this section through all-county letters, or similar instructions from  
11 the director no later than April 1, 2011, with respect to subdivision  
12 (b), and no later than July 1, 2011, with respect to subdivision (c).

13 (f) The department shall adopt regulations as otherwise  
14 necessary to implement this section no later than July 1, 2012.  
15 Emergency regulations adopted for implementation of this section  
16 may be adopted by the director in accordance with the  
17 Administrative Procedure Act (Chapter 3.5 (commencing with  
18 Section 11340) of Part 1 of Division 3 of Title 2 of the Government  
19 Code). The adoption of emergency regulations shall be deemed to  
20 be an emergency and necessary for immediate preservation of the  
21 public peace, health and safety, or general welfare. The emergency  
22 regulations shall be exempt from review by the Office of  
23 Administrative Law. The emergency regulations authorized by  
24 this section shall be submitted to the Office of Administrative Law  
25 for filing with the Secretary of State and shall remain in effect for  
26 no more than 180 days.

27 (g) *This section shall become inoperative on June 1, 2017, and,*  
28 *as of January 1, 2018, is repealed, unless a later enacted statute,*  
29 *that becomes operative on or before January 1, 2018, deletes or*  
30 *extends the dates on which it becomes inoperative and is repealed.*

31 SEC. 5. *Section 11102 of the Welfare and Institutions Code is*  
32 *amended to read:*

33 11102. (a) County residence is not a qualification for aid under  
34 any public assistance program.

35 ~~County~~

36 (b) *County* responsibility for making aid payments is determined  
37 as follows:

38 ~~(a)~~

39 (1) The county where the applicant lives shall accept the  
40 application and shall be responsible for paying the aid.

1     ~~(b)~~

2     (2) Responsibility for payment of aid to any person qualifying  
3     for and receiving aid from any county, who moves to another  
4     county in this state to make his *or her* home, shall be transferred  
5     to the second county as soon as administratively possible, but not  
6     later than the first day of the month following 30 days after  
7     notification to the second county.

8     ~~For~~

9     (c) *For purposes of public assistance the county in which an*  
10    *applicant or recipient lives is:*

11    (1) *For a patient in a state hospital or institution, voluntary,*  
12    *nonprofit, or proprietary facility or other public or private*  
13    *institution, the county from which he or she was admitted.*

14    (2) *For a person who has had to leave the county in which he*  
15    *or she normally lives, solely for the purpose of securing care not*  
16    *otherwise available to him or her in a medical facility, the county*  
17    *in which he or she last maintained a living arrangement outside a*  
18    *medical facility.*

19    ~~(3) For a person who on or after July 1, 1969, has been released~~  
20    ~~or discharged from a state hospital, for a period not to exceed three~~  
21    ~~years from the date of such release, the county from which he was~~  
22    ~~admitted to the hospital.~~

23    ~~(4) For a person who prior to July 1, 1969, has been released~~  
24    ~~on leave of absence from a state hospital, the county from which~~  
25    ~~he was admitted.~~

26    (d) *This section shall become inoperative on June 1, 2017, and,*  
27    *as of January 1, 2018, is repealed, unless a later enacted statute,*  
28    *that becomes operative on or before January 1, 2018, deletes or*  
29    *extends the dates on which it becomes inoperative and is repealed.*

30    SEC. 6. *Section 11102 is added to the Welfare and Institutions*  
31    *Code, to read:*

32    11102. (a) *County residence is not a qualification for aid*  
33    *under any public assistance program.*

34    (b) *County responsibility for making aid payments is determined*  
35    *as follows:*

36    (1) *The county where the applicant lives shall accept the*  
37    *application and shall be responsible for paying the aid.*

38    (2) *Responsibility for payment of aid to a person qualifying for*  
39    *and receiving aid from a county, who moves to another county in*  
40    *this state to make his or her home, shall be transferred to the*

1 *second county as soon as administratively possible pursuant to*  
2 *the requirements set forth in subdivision (a) of Section 10003.*

3 *(c) For purposes of public assistance, the county where an*  
4 *applicant or recipient lives is determined as follows:*

5 *(1) For a patient in a state hospital or institution, voluntary,*  
6 *nonprofit, or proprietary facility, or other public or private*  
7 *institution, the county where he or she was admitted.*

8 *(2) For a person who has had to leave the county where he or*  
9 *she normally lives, solely for the purpose of securing care not*  
10 *otherwise available to him or her in a medical facility, the county*  
11 *where he or she last maintained a living arrangement outside a*  
12 *medical facility.*

13 *(d) This section shall become operative on June 1, 2017.*

14 ~~SEC. 5.~~

15 *SEC. 7. No appropriation pursuant to Section 15200 of the*  
16 *Welfare and Institutions Code shall be made for purposes of*  
17 *implementing this act.*

18 ~~SEC. 6.~~

19 *SEC. 8. If the Commission on State Mandates determines that*  
20 *this act contains costs mandated by the state, reimbursement to*  
21 *local agencies and school districts for those costs shall be made*  
22 *pursuant to Part 7 (commencing with Section 17500) of Division*  
23 *4 of Title 2 of the Government Code.*